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SEP 14 2005

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7590 06/23/2005

Mark G. Bocchetti
EASTMAN KODAK COMPANY
 Patent Legal Staff
 Rochester, NY 14650-2201
 09/15/2005 WABDEL3 00000054 09778010

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP

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June 9, 2005
 June 9, 2005
 September 12, 2005

(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/778,010 | 02/05/2001 | Albert D. Edgar | 86524/DAN | 6233 |

TITLE OF INVENTION: METHOD, SYSTEM, AND SOFTWARE FOR SIGNAL PROCESSING USING SHEEP AND SHEPARD ARTIFACTS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 09/23/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------|----------|----------------|
| KASSA, YOSEF | 2625 | 382-275000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Simon, Galasso
 and Frantz
 2 David A. Novais
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

EASTMAN KODAK COMPANY
343 STATE STREET, ROCHESTER, NY 14650-2201

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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A check in the amount of the fee(s) is enclosed.
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Mark G. Bocchetti /mpc

Date 9-8-05

Typed or printed name _____

Mark G. Bocchetti

Registration No. 31,330

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